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			Document	Page 1 of 6	
Fill in this information	on to identify your cas	se:			
Debtor 1	Joseph	A.	DeNola		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		Check if this is:
United States Bank	kruptcy Court for the:	-	District of New Je	ersey	✓ An amended filing✓ A supplement showing postpetition
Case number (if known)	19-2700	68			chapter 13 income as of the following date
					MM / DD / YYYY
Official Form	n 106l				
Schedule	I: Your Inc	ome			12/15
Po as complete and	accurate as possible	If two married n	oonlo aro filing togg	ther (Debter 1 and Deb	star 2) both are equally recognible for cumplying correc

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse **☑** Employed □ Not Employed ☐ Employed ✓ Not Employed If you have more than one job, **Employment status** attach a separate page with information about additional Occupation employers. **Employer's name** Presidio Network Solutions Include part time, seasonal, or self-employed work. **Employer's address** Occupation may include student Number Street Number Street or homemaker, if it applies. Zip Code Zip Code How long employed there? 8 years Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$14,187.51 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 4. Calculate gross income. Add line 2 + line 3. \$0.00 \$14,187.51

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Debtor 1 Joseph A. DeNola Case number (if known) 19-27068

Last Name

First Name

Middle Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$14,187.51	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$3,581.96	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$860.86	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$4,442.82	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$9,744.69	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$1,316.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify: Net Commission Income	8h.	+ \$2,275.00	+ \$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$2,275.00	\$1,316.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$12,019.69	+ \$1,316.00	\$13,335.69
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.			
	Include contributions from an unmarried partner, members of your househol friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a			•	
	Specify:			_ 11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics			come. Write that	\$13,335.69
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this for	orm?			
	☑ No. ☐ Yes. Explain:				

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Fill in this information	on to identify your case:			
Debtor 1	Joseph	A.	DeNola	Object White is
	First Name	Middle Name	Last Name	Check if this is: ✓ An amended filing
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition of expenses as of the following date:
United States Bankruptcy Court for the:			District of New Jersey	
Case number	19-27068			MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household	d			
1. Is this a joint case? ✓ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a sep ☐ No ☐ Yes. Debtor 2 must file	arate household? Official Form 106J-2, <i>Expenses for</i>	Separate Household of Debtor 2.		
 Do you have dependents? Do not list Debtor 1 and Debtor 2. 	✓ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	ioi cacii acperiacii			No. ☐ Yes.
namee.				- ☐No. ☐Yes.
				- No. Yes.
				- No. Yes.
				- □No. □Yes.
Do your expenses include expenses of people other than yourself and your dependents?	√ No □ Yes			
Part 2: Estimate Your Ongoing N Estimate your expenses as of your bar	kruptcy filing date unless you are			
date after the bankruptcy is filed. If this Include expenses paid for with non-cas such assistance and have included it of	sh government assistance if you k	now the value of		ur expenses
The rental or home ownership experience for the ground or lot.	enses for your residence. Include f	irst mortgage payments and any rent	4	\$3,775.61
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or rente	r's insurance		4b	\$0.00
4c. Home maintenance, repair, and	upkeep expenses		4c	\$300.00
4d. Homeowner's association or cor	ndominium dues		4d.	\$0.00

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Debtor 1 Joseph A. DeNola Case number (if known) 19-27068
First Name Middle Name Last Name

	Yo	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
5. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$300.00
6b. Water, sewer, garbage collection	6b	\$75.00
6c. Telephone, cell phone, Internet, satellite, and cable services		\$470.00
6d. Other. Specify:	6d.	\$0.00
. Food and housekeeping supplies	7.	\$800.00
Childcare and children's education costs	8.	\$0.00
. Clothing, laundry, and dry cleaning	9.	\$100.00
Personal care products and services	10.	\$80.00
Medical and dental expenses	11.	\$150.00
		φ150.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$675.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$545.00
15d. Other insurance. Specify:	15d.	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
7. Installment or lease payments:		
	17a.	\$0.00
17a. Car payments for Vehicle 1 2013 BMW 328xDrive	17b.	\$0.00
17b. Car payments for Vehicle 2	17c.	\$0.00
17c. Other. Specify:	17d.	\$0.00
17d. Other. Specify:	_	Ψ0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1		Joseph	Α.	DeNola	Case numbe	Case number (if known) 19-27068		
		First Name	Middle Name	Last Name				
21.	Other. Spe	ecify:	See Additional Pa	ge	21.	+ \$2,740.00		
22.	Calculate	your monthly exp	penses.					
	22a. Add li	nes 4 through 21			22a.	\$10,110.61		
	22b. Copy	line 22 (monthly	expenses for Debtor 2),	f any, from Official Form 106J-2	22b.	\$0.00		
	22c. Add li	ne 22a and 22b.	The result is your month	y expenses.	22c.	\$10,110.61		
23.	Calculate y	your monthly net	income.					
	23а. Сору	line 12 (your com	nbined monthly income)	rom Schedule I.	23a.	\$13,335.69		
	23b. Copy	your monthly exp	enses from line 22c abo	ve.	23b.	- \$10,110.61		
	23c. Subtra	act your monthly	expenses from your mor	thly income.				
	The r	esult is your mon	thly net income.		23c.	\$3,225.08		
24.	Do you ex	pect an increase	or decrease in your exp	enses within the year after yo	u file this form?			
				car loan within the year or do y				
	☑ No. ☑ Yes.	Explain here: Debtor and Nor	n-Filing Spouse do not c	urrently have any retirement sa	vings and anticipate contributing t	to an account.		

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Debtor 1 Joseph A. DeNola Case number (if known) 19-27068
First Name Middle Name Last Name

	Amou
Other	
Accountant/Tax Prep Fees	\$30
Bank Fees/Service Charges	\$4:
Professional Education/Certification Fees	\$1:
Birthday/Holiday Gifts	55
Non-Filing Spouse's Debt Payments	\$500
Cigarettes	\$600
Anticipated Retirement/Savings Funds	\$1,500